

ASSEMBLY, No. 5532

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED MARCH 25, 2021

Sponsored by:

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District 37 (Bergen)

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District 14 (Mercer and Middlesex)

Assemblyman JOHN ARMATO

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Assemblyman Verrelli

SYNOPSIS

Authorizes homeless shelters to maintain supply of opioid antidotes and permits emergency administration of opioid antidote by shelter staff.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/5/2021)

1 AN ACT concerning the emergency administration of opioid
2 antidotes in homeless shelters, amending and supplementing
3 P.L.1985, c.48, and amending P.L.2013, c.46.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. Section 2 of P.L.1985, c.48 (C.55:13C-2) is amended to read
9 as follows:

10 2. As used in this act:

11 "Emergency condition" means and includes, but is not limited to,
12 a snow emergency, excessive cold or heat, storms or other weather-
13 related conditions.

14 "Emergency shelter for the homeless" means a building or
15 structure in which a public entity or a private, nonprofit
16 organization provides shelter, or food and shelter, to individuals and
17 families having neither a home nor the means to obtain a home or
18 other temporary lodging.

19 "Licensed capacity" means the number of individuals specified
20 by a public officer of a municipality or the Department of
21 Community Affairs as the maximum occupancy level of an
22 emergency shelter for the homeless, or the number of individuals
23 indicated on the certificate of occupancy of the shelter.

24 "Opioid antidote" means any drug, regardless of dosage amount
25 or method of administration, which has been approved by the
26 United States Food and Drug Administration (FDA) for the
27 treatment of an opioid overdose. "Opioid antidote" includes, but is
28 not limited to, naloxone hydrochloride, in any dosage amount,
29 which is administered through nasal spray or any other FDA-
30 approved means or methods.

31 "Opioid overdose" means an acute condition including, but not
32 limited to, extreme physical illness, decreased level of
33 consciousness, respiratory depression, coma, or death resulting
34 from the consumption or use of an opioid drug or another substance
35 with which an opioid drug was combined, and that a layperson
36 would reasonably believe to require medical assistance.

37 (cf: 2013, c.204, s.1)

38
39 2. (New section) a. Each emergency shelter for the homeless
40 shall obtain a supply of opioid antidotes pursuant to a standing
41 order under section 4 of the "Overdose Prevention Act," P.L.2013,
42 c.46 (C.24:6J-4) or section 1 of P.L.2017, c.88 (C.45:14-67.2), to be
43 maintained in a secure location in the emergency shelter for the
44 homeless for the purpose of responding to an opioid overdose
45 emergency. An emergency shelter for the homeless may apply for a

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

1 grant pursuant to section 4 of this act for the costs of (1) purchasing
2 opioid antidotes, and (2) training to enable individuals staffing the
3 emergency shelter for the homeless to administer opioid antidotes.

4 b. Each emergency shelter for the homeless shall ensure that at
5 least staff member is on duty at all times who has received training
6 on standardized protocols for the administration of an opioid
7 antidote to a person who experiences an opioid overdose. The
8 training shall include the overdose prevention information described
9 in subsection a. of section 5 of the "Overdose Prevention Act,"
10 P.L.2013, c.46 (C.24:6J-5). The Commissioner of Community
11 Affairs, in consultation with the Department of Human Services,
12 shall specify an appropriate entity or entities to provide the training
13 to staff at emergency shelters for the homeless.

14 c. An individual staffing an emergency shelter for the homeless
15 who is trained pursuant to subsection b. of this section may
16 administer an opioid antidote to any person whom the individual in
17 good faith believes is experiencing an opioid overdose. The
18 individual shall only be authorized to administer opioid antidotes
19 after receiving the training required under subsection b. of this
20 section.

21 d. An individual staffing an emergency shelter for the homeless
22 who administers an opioid antidote shall ensure that the overdose
23 victim is transported to a hospital emergency room by emergency
24 services personnel after the administration of the opioid antidote,
25 even if the person's symptoms appear to have resolved.

26

27 3. (New section) No emergency shelter for the homeless,
28 individual staffing an emergency shelter for the homeless,
29 pharmacist, or a prescriber of opioid antidotes for an emergency
30 shelter for the homeless through a standing order, shall be held
31 liable for any good faith act or omission consistent with the
32 provisions of this act. Good faith shall not include willful
33 misconduct, gross negligence, or recklessness.

34

35 4. (New section) a. The Commissioner of Human Services
36 may establish a grant program, based upon any monies appropriated
37 by the Legislature, to award grants to emergency shelters for the
38 homeless for the purposes of purchasing opioid antidotes and
39 providing training to enable individuals staffing the emergency
40 shelter for the homeless to administer opioid antidotes. In addition
41 to any monies appropriated by the Legislature, the commissioner
42 may seek money from the federal government, private foundations,
43 and any other source to fund the grants established pursuant to this
44 section.

45 b. To be eligible for consideration of a grant award, an
46 emergency shelter for the homeless shall submit an application to
47 the Department of Human Services, in accordance with application
48 procedures and requirements prescribed by the commissioner. A

1 grant application shall include, at a minimum, information
2 regarding: the quantity of opioid antidotes the emergency shelter for
3 the homeless intends to obtain; the number of individuals staffing
4 the emergency shelter for the homeless who are, or will be, trained
5 in administering opioid antidotes; the prevalence of opioid abuse
6 and overdose deaths in the geographic area where the emergency
7 shelter for the homeless is located; and any other information
8 specified by the commissioner.

9 c. The commissioner shall establish selection criteria for the
10 awarding of grant funds under the program and shall award grants
11 based upon review of the applications and subject to the availability
12 of funds. The commissioner shall establish the amount for each
13 grant that is approved.

14
15 5. Section 3 of P.L.2013, c.46 (C.24:6J-3) is amended to read
16 as follows:

17 3. As used in this act:

18 "Commissioner" means the Commissioner of Human Services.

19 "Drug overdose" means an acute condition including, but not
20 limited to, physical illness, coma, mania, hysteria, or death resulting
21 from the consumption or use of a controlled dangerous substance or
22 another substance with which a controlled dangerous substance was
23 combined and that a layperson would reasonably believe to require
24 medical assistance.

25 "Emergency medical response entity" means an organization,
26 company, governmental entity, community-based program, or
27 healthcare system that provides pre-hospital emergency medical
28 services and assistance to opioid or heroin addicts or abusers in the
29 event of an overdose. "Emergency medical response entity"
30 includes, but is not limited to, a first aid, rescue and ambulance
31 squad or other basic life support (BLS) ambulance provider; a
32 mobile intensive care provider or other advanced life support (ALS)
33 ambulance provider; an air medical service provider; or a fire-
34 fighting company or organization, which squad, provider, company,
35 or organization is qualified to send paid or volunteer emergency
36 medical responders to the scene of an emergency.

37 "Emergency medical responder" means a person, other than a
38 health care practitioner, who is employed on a paid or volunteer
39 basis in the area of emergency response, including, but not limited
40 to, an emergency medical technician, a mobile intensive care
41 paramedic, or a fire fighter, acting in that person's professional
42 capacity.

43 "Health care practitioner" means a prescriber, pharmacist, or
44 other individual whose professional practice is regulated pursuant to
45 Title 45 of the Revised Statutes, and who, in accordance with the
46 practitioner's scope of professional practice, prescribes or dispenses
47 an opioid antidote.

1 "Medical assistance" means professional medical services that
2 are provided to a person experiencing a drug overdose by a health
3 care practitioner, acting within the practitioner's scope of
4 professional practice, including professional medical services that
5 are mobilized through telephone contact with the 911 telephone
6 emergency service.

7 "Opioid antidote" means any drug, regardless of dosage amount
8 or method of administration, which has been approved by the
9 United States Food and Drug Administration (FDA) for the
10 treatment of an opioid overdose. "Opioid antidote" includes, but is
11 not limited to, naloxone hydrochloride, in any dosage amount,
12 which is administered through nasal spray or any other FDA-
13 approved means or methods.

14 "Patient" means a person who is at risk of an opioid overdose or
15 a person who is not at risk of an opioid overdose who, in the
16 person's individual capacity, obtains an opioid antidote from a
17 health care practitioner, professional, or professional entity for the
18 purpose of administering that antidote to another person in an
19 emergency, in accordance with subsection c. of section 4 of
20 P.L.2013, c.46 (C.24:6J-4). "Patient" includes a professional who is
21 acting in that professional's individual capacity, but does not
22 include a professional who is acting in a professional capacity.

23 "Prescriber" means a health care practitioner authorized by law
24 to prescribe medications who, acting within the practitioner's scope
25 of professional practice, prescribes an opioid antidote. "Prescriber"
26 includes, but is not limited to, a physician, physician assistant, or
27 advanced practice nurse.

28 "Professional" means a person, other than a health care
29 practitioner, who is employed on a paid basis or is engaged on a
30 volunteer basis in the areas of substance abuse treatment or therapy,
31 criminal justice, or a related area, and who, acting in that person's
32 professional or volunteer capacity, obtains an opioid antidote from a
33 health care practitioner for the purposes of dispensing or
34 administering that antidote to other parties in the course of business
35 or volunteer activities. "Professional" includes, but is not limited
36 to, a sterile syringe access program employee, or a law enforcement
37 official.

38 "Professional entity" means an organization, company,
39 governmental entity, community-based program, sterile syringe
40 access program, or any other organized group that employs two or
41 more professionals who engage, during the regular course of
42 business or volunteer activities, in direct interactions with opioid or
43 heroin addicts or abusers or other persons susceptible to opioid
44 overdose, or with other persons who are in a position to provide
45 direct medical assistance to opioid or heroin addicts or abusers in
46 the event of an overdose.

1 "Recipient" means a patient, professional, professional entity,
2 emergency medical responder, **[or]** emergency medical response
3 entity, or emergency shelter for the homeless who is prescribed or
4 dispensed an opioid antidote in accordance with section 4 of
5 P.L.2013, c.46 (C.24:6J-4).
6 (cf: P.L.2017, c.381, s.1)
7

8 6. Section 4 of P.L.2013, c.46 (C.24:6J-4) is amended to read
9 as follows:

10 4. a. (1) A prescriber or other health care practitioner, as
11 appropriate, may prescribe or dispense an opioid antidote:

12 (a) directly or through a standing order, to any recipient who is
13 deemed by the health care practitioner to be capable of
14 administering the opioid antidote to an overdose victim in an
15 emergency;

16 (b) through a standing order, to any professional or emergency
17 medical responder who is not acting in a professional or volunteer
18 capacity for a professional entity, or an emergency medical
19 response entity, but who is deemed by the health care practitioner to
20 be capable of administering opioid antidotes to overdose victims, as
21 part of the professional's regular course of business or volunteer
22 activities;

23 (c) through a standing order, to any professional who is not
24 acting in a professional or volunteer capacity for a professional
25 entity, but who is deemed by the health care practitioner to be
26 capable of dispensing opioid antidotes to recipients, for
27 administration thereby, as part of the professional's regular course
28 of business or volunteer activities;

29 (d) through a standing order, to any professional entity or any
30 emergency medical response entity, which is deemed by the health
31 care practitioner to employ professionals or emergency medical
32 responders, as appropriate, who are capable of administering opioid
33 antidotes to overdose victims as part of the entity's regular course of
34 business or volunteer activities;

35 (e) through a standing order, to any professional entity which is
36 deemed by the health care practitioner to employ professionals who
37 are capable of dispensing opioid antidotes to recipients, for
38 administration thereby, as part of the entity's regular course of
39 business or volunteer activities ;

40 (f) through a standing order, to an emergency shelter for the
41 homeless pursuant to the provisions of section 2 of
42 P.L. , c. (C.) (pending before the Legislature as this bill).

43 (2) (a) For the purposes of this subsection, whenever the law
44 expressly authorizes or requires a certain type of professional or
45 professional entity to obtain a standing order for opioid antidotes
46 pursuant to this section, such professional, or the professionals

1 employed or engaged by such professional entity, as the case may
2 be, shall be presumed by the prescribing or dispensing health care
3 practitioner to be capable of administering or dispensing the opioid
4 antidote, consistent with the express statutory requirement.

5 (b) For the purposes of this subsection, whenever the law
6 expressly requires a certain type of emergency medical responder or
7 emergency medical response entity to obtain a standing order for
8 opioid antidotes pursuant to this section, such emergency medical
9 responder, or the emergency medical responders employed or
10 engaged by such emergency medical response entity, as the case
11 may be, shall be presumed by the prescribing or dispensing health
12 care practitioner to be capable of administering the opioid antidote,
13 consistent with the express statutory requirement.

14 (3) (a) Whenever a prescriber or other health care practitioner
15 prescribes or dispenses an opioid antidote to a professional or
16 professional entity pursuant to a standing order issued under
17 paragraph (1) of this subsection, the standing order shall specify
18 whether the professional or professional entity is authorized thereby
19 to directly administer the opioid antidote to overdose victims; to
20 dispense the opioid antidote to recipients, for their administration to
21 third parties; or to both administer and dispense the opioid antidote.
22 If a standing order does not include a specification in this regard, it
23 shall be deemed to authorize the professional or professional entity
24 only to administer the opioid antidote with immunity, as provided
25 by subsection c. of this section, and it shall not be deemed to
26 authorize the professional or professional entity to engage in the
27 further dispensing of the antidote to recipients, unless such
28 authority has been granted by law, as provided by subparagraph (b)
29 of this paragraph.

30 (b) Notwithstanding the provisions of this paragraph to the
31 contrary, if the law expressly authorizes or requires a certain type of
32 professional, professional entity, emergency medical responder,
33 **【or】** emergency medical response entity, or emergency shelter for
34 the homeless to administer or dispense opioid antidotes pursuant to
35 a standing order issued hereunder, the standing order issued
36 pursuant to this section shall be deemed to grant the authority
37 specified by the law, even if such authority is not expressly
38 indicated on the face of the standing order.

39 (4) Any prescriber or other health care practitioner who
40 prescribes or dispenses an opioid antidote in good faith, and in
41 accordance with the provisions of this subsection, shall not, as a
42 result of the practitioner's acts or omissions, be subject to any
43 criminal or civil liability, or any professional disciplinary action
44 under Title 45 of the Revised Statutes for prescribing or dispensing
45 an opioid antidote in accordance with P.L.2013, c.46 (C.24:6J-
46 1 et seq.).

1 b. (1) Any professional or professional entity that has obtained
2 a standing order, pursuant to subsection a. of this section, for the
3 dispensing of opioid antidotes, may dispense an opioid antidote to
4 any recipient who is deemed by the professional or professional
5 entity to be capable of administering the opioid antidote to an
6 overdose victim in an emergency.

7 (2) Any professional or professional entity that dispenses an
8 opioid antidote in accordance with paragraph (1) of this subsection,
9 in good faith, and pursuant to a standing order issued under
10 subsection a. of this section, shall not, as a result of any acts or
11 omissions, be subject to any criminal or civil liability or any
12 professional disciplinary action for dispensing an opioid antidote in
13 accordance with P.L.2013, c.46 (C.24:6J-1 et seq.).

14 c. (1) Any emergency medical responder or emergency
15 medical response entity that has obtained a standing order, pursuant
16 to subsection a. of this section, for the administration of opioid
17 antidotes, may administer an opioid antidote to overdose victims.

18 (2) Any emergency medical responder or emergency medical
19 response entity that administers an opioid antidote, in good faith, in
20 accordance with paragraph (1) of this subsection, and pursuant to a
21 standing order issued under subsection a. of this section, shall not,
22 as a result of any acts or omissions, be subject to any criminal or
23 civil liability, or any disciplinary action, for administering the
24 opioid antidote in accordance with P.L.2013, c.46 (C.24:6J-1 et
25 seq.).

26 d. (1) Any person who is the recipient of an opioid antidote,
27 which has been prescribed or dispensed for administration purposes
28 pursuant to subsection a. or b. of this section, and who has received
29 overdose prevention information pursuant to section 5 of P.L.2013,
30 c.46 (C.24:6J-5), may administer the opioid antidote to another
31 person in an emergency, without fee, if the antidote recipient
32 believes, in good faith, that the other person is experiencing an
33 opioid overdose.

34 (2) Any person who administers an opioid antidote pursuant to
35 paragraph (1) of this subsection shall not, as a result of the person's
36 acts or omissions, be subject to any criminal or civil liability for
37 administering the opioid antidote in accordance with P.L.2013, c.46
38 (C.24:6J-1 et seq.).

39 e. In addition to the immunity that is provided by this section
40 for authorized persons who are engaged in the prescribing,
41 dispensing, or administering of an opioid antidote, the immunity
42 provided by section 7 or section 8 of P.L.2013, c.46 (C.2C:35-30 or
43 C.2C:35-31) shall apply to a person who acts in accordance with
44 this section, provided that the requirements of those sections, as
45 applicable, have been met.

1 f. Notwithstanding the provisions of any law, rule, regulation,
2 ordinance, or institutional or organizational directive to the
3 contrary, any person or entity authorized to administer an opioid
4 antidote, pursuant to this section, may administer to an overdose
5 victim, with full immunity:

6 (1) a single dose of any type of opioid antidote that has been
7 approved by the United States Food and Drug Administration for
8 use in the treatment of opioid overdoses; and

9 (2) up to three doses of an opioid antidote that is administered
10 through intranasal application, or through an intramuscular auto-
11 injector, as may be necessary to revive the overdose victim. Prior
12 consultation with, or approval by, a third-party physician or other
13 medical personnel shall not be required before an authorized person
14 or entity may administer up to three doses of an opioid antidote, as
15 provided in this paragraph, to the same overdose victim.

16 g. No later than 45 days after the effective date of P.L.2017,
17 c.381, the Commissioner of Health shall provide written notice to
18 all emergency medical response entities affected by subsection f. of
19 this section, notifying them of the provisions of subsection f. of this
20 section.

21 h. Any emergency shelter for the homeless or individual
22 staffing an emergency shelter for the homeless who administers, or
23 permits the administration of, an opioid antidote in good faith in
24 accordance with the provisions of section 2 of P.L. , c. (C.)
25 (pending before the Legislature as this bill), and pursuant to a
26 standing order issued under subsection a. of this section, shall not,
27 as a result of any acts or omissions, be subject to any criminal or
28 civil liability, or any disciplinary action, for administering, or for
29 permitting the administration of, the opioid antidote in accordance
30 with P.L.2013, c.46 (C.24:6J-1 et seq.).

31 (cf: P.L.2017, c.381, s.2)

32
33 7. This act shall take effect on the first day of the fourth month
34 next following the date of enactment.

35
36
37 STATEMENT

38
39 This bill requires emergency shelters for the homeless to obtain a
40 supply of opioid antidotes to be maintained in a secure location in
41 the emergency shelter for the homeless for the purpose of
42 responding to an opioid overdose emergency. An emergency
43 shelter for the homeless may obtain the opioid antidotes through a
44 standing order pursuant to the "Overdose Prevention Act,"
45 P.L.2013, c.46 (C.24:6J-1 et seq.), or from a pharmacist pursuant to
46 the provisions of P.L.2017, c.88 (C.45:14-67.2). Each emergency

1 shelter for the homeless will be required to have at least one
2 individual staffing the emergency shelter at all times who is trained
3 in the administration of opioid antidotes. The Commissioner of
4 Community Affairs, in consultation with the Department of Human
5 Services, will specify an appropriate entity or entities to provide the
6 training to staff at emergency shelters for the homeless, and the
7 training will include the overdose prevention information described
8 in subsection a. of section 5 of the “Overdose Prevention Act”
9 (C.24:6J-5). Under the bill, in individual staffing an emergency
10 shelter for the homeless who is properly trained will be permitted to
11 administer an opioid antidote to any person whom the individual, in
12 good faith, believes is experiencing an opioid overdose.

13 The bill authorizes the Commissioner of Human Services to
14 establish a grant program in order to assist emergency shelters for
15 the homeless with the costs of purchasing opioid antidotes and
16 providing training to shelter staff. The grant program will be based
17 upon any monies appropriated by the Legislature and any monies
18 the commissioner may seek from the federal government, private
19 foundations, or other sources. To be eligible for consideration of a
20 grant award, an emergency shelter for the homeless will submit an
21 application to the Department of Human Services in accordance
22 with application procedures and requirements prescribed by the
23 commissioner. At a minimum, the grant applications will include
24 information regarding: the quantity of opioid antidotes the
25 emergency shelter for the homeless intends to obtain; the number of
26 individuals staffing the emergency shelter for the homeless who are,
27 or will be, trained in administering opioid antidotes; the prevalence
28 of opioid abuse and overdose deaths in the geographic area where
29 the emergency shelter for the homeless is located; and other
30 information as specified by the commissioner. The commissioner
31 will establish selection criteria for awarding the grants, subject to
32 the availability of funds, and will determine the amount for each
33 grant that is approved.

34 The bill provides immunity from liability for emergency shelters
35 for the homeless, shelter staff, pharmacists, and prescribers of
36 opioid antidotes for emergency shelters for the homeless, for good
37 faith acts or omissions consistent with the bill’s provisions. In
38 addition, the bill amends the “Overdose Prevention Act” to: (1)
39 include emergency shelters for the homeless among the recipients
40 that may be prescribed opioid antidotes through a standing order;
41 and (2) provide that immunity from liability for opioid antidote
42 administration in accordance with the “Overdose Prevention Act”
43 will be applicable to emergency shelters for the homeless and
44 shelter staff who administer, or permit the administration of, opioid
45 antidotes in good faith under the provisions of the bill.